STATEMENT OF ECONOMIC INTERESTS Date Initial Filing Received COVER PAGE TY CLEAN OF ICE

| Please type or print in ink. | | • | | o William | |
|--|--|-------------------------------|--------------------|--------------------------------------|--|
| ME OF FILER (LAST) | (FIRST) | 16 | AUG 11 | P6:13 (MIDDL |) |
| Basile | Leah | •:= | 1100 11 | Ann | |
| 1. Office, Agency, or Court | | | | | |
| Agency Name (Do not use acronyms) | | | | | |
| City of Lake Forest | | | | | |
| Division, Board, Department, District, if applicable | · · · · · · · · · · · · · · · · · · · | Your Position | | | |
| N/A | | Council Membe | er | | |
| ► If filing for multiple positions, list below or on an | attachment. (Do not use a | ncronyms) | - , | | · · · · · <u>-</u> · · · · · · · · · · · · · · · · · · · |
| Agency: N/A | | Position: N/A | | | |
| 2. Jurisdiction of Office (Check at least on | e box) | | <u></u> | | |
| ☐ State | | ☐ Judge or Court Co | mmissioner | (Statewide Jurisdiction) |) |
| Multi-County | | County of | | | |
| ☑ City of Lake Forest | | - | | | |
| 3. Type of Statement (Check at least one bo |)×) | | | | |
| Annual: The period covered is January 1, 20 December 31, 2015. | 15, through | Leaving Office: (Check one) | Date Left _ | | |
| The period covered is/ | /, through | The period co leaving office. | vered is Jar | nuary 1, 2015, through | the date of |
| Assuming Office: Date assumed | | | | | , through |
| ✓ Candidate: Election year2016 | _ and office sought, if dif | ferent than Part 1: | | ···· | ······································ |
| 4. Schedule Summary (must complete Schedules attached |) ► Total number o | f pages including th | nis cover | page: | |
| Schedule A-1 - Investments - schedule att | ached [2] | schedule C - Income, Los | ans, & Busii | ness Positions – sched | ule attached |
| Schedule A-2 - Investments - schedule att | | Schedule D - Income - G | | | |
| Schedule B - Real Property - schedule att | ached [] \$ | Schedule E - Income – G | ifts – Trave | l Payments – schedule | attached |
| -or- | | | | | |
| ☐ None - No reportable interests on an | y schedule | | | | |
| 5. Verification | | | | | · · · · · · · · · · · · · · · · · · · |
| MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Document) | CITY | | STATE | ZIP CODE | ***** |
| (DESIROS & Aguiley Audioss Neconniterates - Pasic Document) | Trabuco Can | /on | CA 2 | 92679 | |
| DAYTIME TELEPHONE NUMBER | <u></u> | MAIL ADDRESS | | 02010 | |
| () | | | | | |
| I have used all reasonable diligence in preparing thi herein and in any attached schedules is true and c | s statement. I have reviewe omplete. I acknowledge thi | d this statement and to the | e best of my | y knowledge the informa | ation contained |
| I certify under penalty of perjury under the laws | | . / | µe and con | rect. | |
| Date Signed 08/11/2016 | Ci | and less | 1/5 | r | |
| (month, day, year) | Sign | eature(File the or | riginally signed s | talement with your filing official.) | |



Investments Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%) Do not attach brokorage or financial statemants.

CALIFORNIA FORM 700

Name

Leah A. Basile

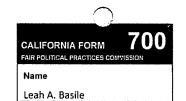
<BLUE> is a required field

| NAME OF BURINESS ENTITY | GENERAL DESCRIPTION OF THIS SUGMESS ACTIVITY | FAR MARKET VALUE (Select from stop down but) | NATURE OF INVESTMENT (Solvet from shop down fail. If father," slowning) | IF APPLICABLE, LIST DATE (minAdd/2016) ACQUIRED DIRPOSED |
|--|---|---|---|--|
| Abbott S | locks | \$10,001 - \$100,000 | Stock | 8/24/2016 |
| S&P 500 VIX Short Term Futures S | locks | \$2,000 - \$10,000 | Stock | 7/18/2016 |
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SCHEDULE A-2

Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)



* Select from drop down list

<BLUE>is a required field

1142

| 1. Business Entity or Trust (For reporting a trust, enter the name then skip to box 2.) | | | | | | | 2. Gross Income Received | 3. Sources of Income of \$10,000 or more | Investments or Interests in Real Property Held by the Business Entity Trust (Use a separate line for each investment or real property interest.) | | | | | ness Entity o |
|---|---|----------------------|---|---------------------|---|------------------------------|--|---|--|--|----------------------|---|--------------|---|
| NAME AND ADDRESS OF BUSINESS ENTITY OR TRUST (Business Address Acceptable) (If Trust, go to 2) | GENERAL DESCRIPTION OF BUSINESS ACTIVITY | FAIR MARKET VALUE | LIST DATE ACQUIRED OR DISPOSED (mm/dd/2015) | A or D | NATURE OF INVESTMENT (If "other," describe)" | YOUR BUSINESS POSITION | INCLUDE YOUR PRO RATA SHARE OF GROSS INCOME TO ENTITY/TRUST* | LIST SINGLE SOURCES OF INCOME OF | INVESTMENT- BUSINESS ENTITYINAME, AND BUSINESS ACTIVITY | REAL PROPERTY- LIST PRECISE LOCATION OF REAL PROPERTY | FAIR MARKET VALUE | LIST DATE ACQUIRED OR DISPOSED (mm/dd/2015) | A or D | NATURE OF INTEREST (If "other," describe)* |
| | Equipment Leasing | \$0 - \$1,999 | | | Partnership | Co-owner | \$0-\$499 | | | | | | | |
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FPPC Form 700 (2015/2016) Sch. A-2x FPPC Toll-Free Helpline: 866/ASK-FPPC www.fppc.ca.gov



4.

Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)

| | _ |
|-------------------------------------|---|
| CALIFORNIA FORM 700 | , |
| FAIR POLITICAL PRACTICES COMMISSION | ٠ |
| Name | _ |
| Leah A. Basile | |

| Select from drop down list | | | | | **You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows: | | | | | | |
|---|------------------------------|----------------------------------|-------------------|--|---|------------------------------|---------------------|-------------------------|-------------------|--|--|
| 1. Income Received | | 2. Loans Received or Outstanding | | | | | | | | | |
| NAME AND ADDRESS OF SOURCE | BUSINESS ACTIVITY, IF ANY | | RECEIVED* | CONSIDERATION FOR WHICH INCOME WAS RECEIVED* (if "other," describe) | NAME AND ADDRESS OF LENDER** (Business Address Acceptable) AND GUARANTOR, IF ANY | BUSINESS ACTIVITY, IF ANY | HIGHEST BALANCE* | INTEREST RATE (%) | TERM (Mos/Yrs) | SECURITY FOR LOAN REAL PROPERTY ADDRESS/OTHER INFORMATION* | |
| Michael Basile Trabuco Canyon CA 92679 | Engineering | Area Sales Manager | Over \$100,000 | Spouse's or registered domestic partner's income | | | | | | | |
| Trinity Leasing | Equipment Leasing | Owner | \$500-\$1,000 | Partnership | | | | | | | |
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